

# UNITED STATES DISTRICT COURT

for the

Middle District of Tennessee

Jarrett

Plaintiff

v.

United States of America

Defendant

Civil Action No. 3:21-cv-00419

## SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) UNITED STATES OF AMERICA  
c/o The Honorable Merrick B. Garland  
Department of Justice, Room B103  
950 Pennsylvania Ave., NW  
Washington, DC 20530-0001

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:


Cameron T. Norris  
Consovoy McCarthy PLLC  
1600 Wilson Blvd., Ste. 700  
Arlington, VA 22209

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 5/26/2021



CLERK OF COURT

  
Signature of Clerk or Deputy Clerk

Civil Action No. \_\_\_\_\_

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* Merrick Garland, U.S. Attorney General  
was received by me on *(date)* May 26, 2021 .

☐ I personally served the summons on the individual at *(place)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_ ; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_ , and mailed a copy to the individual's last known address; or

☒ I served the summons on *(name of individual)* Merrick Garland, U.S. Attorney General , who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
U.S. Department of Justice on *(date)* June 4, 2021 ; or

☐ I returned the summons unexecuted because \_\_\_\_\_ ; or

☒ Other *(specify)*: Served by certified mail. Return receipt is attached.

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ 0.00 .

I declare under penalty of perjury that this information is true.

Date: June 17, 2021

/s/ Sean P. McElroy

\_\_\_\_\_  
*Server's signature*

Sean P. McElroy, Associate Attorney, Fenwick & West LLP

\_\_\_\_\_  
*Printed name and title*

Silicon Valley Center  
801 California Street  
Mountain View, CA 94041

\_\_\_\_\_  
*Server's address*

Additional information regarding attempted service, etc:

USPS TRACKING #



9590 9402 1838 6104 6975 97



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

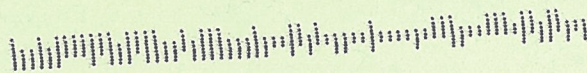
United States  
Postal Service

• Sender: Please

Sean McElroy

P+4® in this box®

Fenwick & West LLP  
Silicon Valley Center  
801 California St.  
Mt. View, CA 94041



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature</p> <p><b>X</b> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>UNITED STATES OF AMERICA c/o The Honorable Merrick B. Garland Department of Justice, Room B103 950 Pennsylvania Ave., NW Washington, DC 20530-0001</p>		<p>B. Received by (Print Name)</p> <p><i>[Signature]</i></p>	<p>C. Date of Delivery</p> <p><i>[Signature]</i></p>
<p>2. Article Number (Transfer from service label)</p> <p>7018 1830 0001 5997 2287</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Registered Mail</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery (\$500)</p>		<p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	